## DO NOT SEND TO IRS

Vendor MUST Print or Type Information

GAO-W-9 Revised 03/15/05

## STATE OF ARIZONA

SUBSTITUTE W-9 & VENDOR AUTHORIZATION FORM

DO NOT SEND TO IRS

Vendor MUST Print Or Type Information

Taxpayer Identification	on Number (TIN)	34-2048638				Employer Identific		l) • s		zona HRIS EIN na Employees ONLY	
Legal Name  Must match TIN above	Burke Weissenborn, LLC										
• Entity Type Select one of the following • Minority Business Indicator Select one of the following											
□ Corporation (NOT providing health care, medical or legal services (5A) □ Corporation (providing health care, medical or legal services) (5M) □ Partnership, LLP (5T) □ Individual/Sole Proprietor (6I) □ The US or any or its political subdivisions or instrumentalities (2G) □ A state, a possession of the US, or any of their political subdivisions or instrumentalities (4G) □ Tax-exempt organization under IRC §501 (5C) □ An international organization or any of its agencies or instrumentalities (5U) □ State of Arizona employee (1E) □ Other Non-Tax-Exempt Entity (5P)							□ Small Business (01) □ Small Business – African American (23) □ Small Business – Asian (24) □ Small Business – Hispanic (25) □ Small Business – Native American (27) □ Small Business – Other Minority (05) ☑ Small, Woman Owned Business (06) □ Small, Woman Owned Business - African American (29) □ Small, Woman Owned Business – Asian (30) □ Small, Woman Owned Business – Hispanic (31) □ Small, Woman Owned Business – Native American (33)				
Main Address	Where tax information and general correspondence is to be malled						☐ Small, Woman Owned Business – Other Minority (11)				
DBA\Branch\Location	Burke Weissenborn, LLC					☐ Woman ☐ Woman	□ Woman Owned Business - African American (17)     □ Woman Owned Business - Asian (18)     □ Woman Owned Business - Hispanic (19)     □ Woman Owned Business - Native American (21)     □ Woman Owned Business - Other Minority (08)     □ Minority Owned Business - African American (17)     □ Minority Owned Business - Asian (32)     □ Minority Owned Business - Hispanic (74)				
Address	110 South Church Avenue, Suite 8300					□ Woman □ Woman					
Address continued						☐ Minority☐ Minority☐ Minority					
City Tucson	State AZ Zip code 85701					☐ Minority ☐ Non-Pro	☐ Minority Owned Business – Native American (15) ☐ Minority Owned Business – Other Minority (02) ☐ Non-Profit, IRC §501© (88) ☐ Non-Small, Non-Minority or Non-Woman Owned Business (00)				
● Remit to Address ⊠ Same as Main						Contact In	Contact Information				
DBA\Branch\Location					Name						
Address						Phone #	(520) 792-8200 EXT				
Address continued						Fax	(520) 792-8400				
City	State Zip code				email	bev@bw-appraisals.com					
Certification											
Under Penalties of perjury, I certify that:  1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be Issued to me) AND  2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding AND  3. I am a U.S. person (including U.S. resident alien).  Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.  The Internal Revenue Service does not require your coasent to any provision of this document other than the certification required to avoid backup.											
	vice does not requi	//	to any pro	1		ument other th	an me cermica	٦			
Signature Series alenish Title Partner							Current Date 8/19/05				
STATE OF ARIZONA AGENCY USE ONLY VENDOR: DO NOT WRITE BELOW THIS LINE											
AGY Ager	ncy Authorization				Print Na	ame			Date		
STATE OF ARIZONA GAO USE ONLY VENDOR & STATE AGENCY: DO NOT WRITE BELOW THIS LINE											
☐ IRS TIN Matching ☐ Corporation Commission / ☐ HRIS ☐ Other ☐ ☐ Other ☐ ☐ Other ☐ ☐ Other ☐ ☐ ☐ Other ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐											
Vendor Number		MC	Process	ed by	,			Date Proc	essed		